

**State of Vermont**  
**Public Service Board**

**Notice of Transfer of Certificate of Public Good for  
Interconnected Net Metered Power System to Reflect  
Change of Ownership**

Please print:

Certificate of Public Good No. \_\_\_\_\_

Name of Prior Owner \_\_\_\_\_

**Applicant**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Service Address (if different from above): \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Utility Account #: \_\_\_\_\_

-----

Property Owner Name (if different than above): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Mail the completed application to the Public Service Board, 112 State St., Drawer 20,  
Montpelier, VT 05620-2701. Copies of the application also must be sent to the Department of  
Public Service and the applicant's respective utility. You can contact the Public Service Board  
for information relating to this application at (802) 828-2358.

The undersigned declares, under the pains and penalties of perjury, that:

(1) having exercised due diligence and made reasonable inquiry, the information which I have provided on this form and any attachments is true and correct to the best of my knowledge;

(2) the project has not been modified or changed in any material manner from the originally approved project and is in all respects identical to the originally approved system;

(3) the system is covered by an insurance policy with a minimum general liability of \$100,000 for residential systems and \$300,000 for farm and non-residential sites;

(4) the system will continue to be operated in compliance with the interconnection safety and technological requirements of the Public Service Board; and

(5) I have sent a copy of this complete form to my respective electric utility as required by this form.

**Making false or misleading statements on this form is subject to penalties under 30 V.S.A. § 30 and/or revocation of the project's Certificate of Public Good.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Applicant